

Flathead County

Planning & Zoning

40 11th Street West, Suite 220 Kalispell, MT 59901 Telephone 406.751.8200 Fax 406.751.8210 RECEIVED

MAY 2 4 2019

MAJOR SUBDIVISION PRELIMINARY PLAT APPLICATION

Submit this application, all required information, and appropriate fee (see current fee schedule) to the Planning & Zoning office at the address listed above.

| | FEE ATTACHED \$ 1245 |
|---|-------------------------------------|
| SUBDIVISION NAME: Saint Herman Subdivision | |
| OWNER(S) OF RECORD: | |
| Name: Andrew J. and Karen L. Stimer, Co-Trustees of the Stimer | er Family Trust Phone: 805-377-0475 |
| Mailing Address: 23440 SE Daybreak Place | |
| City, State, Zip: Maple Valley, WA 98058 | |
| Email: andystimer@earthlink.net | |
| APPLICANT (IF DIFFERENT THAN ABOVE): | |
| Name: Saint Herman Orthodox - Father Daniel Kirk | Phone: 406-475-2641 |
| Mailing Address: PO Box 11089 | |
| City, State, Zip Code: Kalispell, MT 59904 | |
| Email: frdanielkirk@gmail.com | |
| TECHNICAL/PROFESSIONAL PARTICIPANTS: Name: Meridian Land Surveying, Inc Sean McFarland, PLS Mailing Address: P.O. Box 587 City, State, Zip: Gallatin Gateway, MT 59730 Email: uncutmt@gmail.com | Phone: <u>406-579-8922</u> |
| Name: | |
| LEGAL DESCRIPTION OF PROPERTY: | |
| Street Address 285 North Hill Road | |
| City/State & Zip Kalispell, MT 59901 | |
| Assessor's Tract No.(s) 0970549 | Lot No.(s)_SW1/4NW1/4 |
| Section 16 Township 28 N | Range 22 W |

| will create one lot for Saint Herman's Orthodox Church and one lot for an existing residence, | |
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| | |
| Number of Lots or Rental Spaces 2 Total Acreage in Subdivision 40.822 | |
| Total Acreage in Lots 39.009 Minimum Size of Lots or Spaces 5.436 | |
| Total Acreage in Streets or Roads 1.813 Maximum Size of Lots or Spaces 35.386 | |
| Total Acreage in Parks, Open Spaces and/or Common Areas0 | |
| PROPOSED USE(S) AND NUMBER OF ASSOCIATED LOTS/SPACES: | |
| Single Family _1 Townhouse Mobile Home Park | |
| Duplex Apartment Recreational Vehicle Park | |
| Commercial Industrial Planned Unit Development | |
| Condominium Multi-Family Other 1- Church | |
| | |
| APPLICABLE ZONING DESIGNATION & DISTRICT: None | |
| IS SUBJECT PROPERTY LOCATED WITHIN 3-MILE BUFFER OF KALISPELL, WHITEFISH, OR COLUMBIA FALLS? Yes | |
| ESTIMATE OF MARKET VALUE BEFORE IMPROVEMENTS: \$300,000 | |
| IMPROVEMENTS TO BE PROVIDED: | |
| Roads: X Gravel X Paved Curb Gutter Sidewalks Alleys Other | |
| * Water System: Individual Shared Multiple User _X Public | |
| * Sewer System: Individual Shared Multiple User _X Public | |
| Other Utilities:Cable TVX_TelephoneX_ElectricGasOther | |
| Solid Waste:Home Pick UpCentral Storage XContract HaulerOwner Haul | |
| Mail Delivery:Central _XIndividual School District: _Smith Valley 89 | |
| Fire Protection:HydrantsTanker Recharge Fire District: Smith Valley | |
| Drainage System: Storm water ponds proposed as part of church lot development | |
| * Individual (one user) Shared (two user) Multiple user (3-9 connections or less the 25 people served at least 60 days of the year) Public (more than 10 connections or 25 or more people served at least 60 days of the year) * If the water supply and wastewater treatment systems are shared, multiple user, or public, provide a statement of whether the systems will be public utilities as defined in 69-3-101 and subject to the jurisdiction of the public service commission or exempt from public service commission jurisdiction. If exempt, provide an | |

| | complete and follow a Storm Water Protection Plan, if site disturbance is > 1 acre. | | |
|--------------|---|--|--|
| VARI | ANCES: ARE ANY VARIANCES REQUESTED? No (yes/no) s, please complete the information on page 3) | | |
| SECT | TON OF REGULATIONS CREATING HARDSHIP: | | |
| PLEA BELO | PLEASE RESPOND TO THE FOLLOWING STATEMENTS IN THE SPACES PROVIDED BELOW: (The Commission shall not approve a variance unless it finds that all of the following are met) | | |
| 1. | The variance will not be detrimental to the public health, safety, or general welfare or injurious to other adjoining properties. | | |
| | | | |
| 2. | Due to the physical surroundings, shape, or topographical conditions of the property involved, strict compliance with the regulations will impose an undue hardship on the owner. Undue hardship does not include personal or financial hardship, or any hardship that is self imposed. | | |
| | | | |
| 3. | The variance will not cause a substantial increase in public costs, now or in the future. | | |
| | | | |
| 4. | The variance will not place the subdivision in nonconformance with any adopted growth policy, neighborhood plan or zoning regulations. | | |
| | | | |
| 5. | The variance is consistent with the surrounding community character of the area. | | |
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APPLICATION CONTENTS:

- 1. Completed Preliminary Plat application (If submitting bound copies of the application materials, please also include one **unbound** copy for replication purposes).
- 2. 14 folded copies of the preliminary plat. (Either 18" X 24" or 24" X 36" per Appendix B- Flathead County Subdivision Regulations).
- 3. One reproducible set of supplemental information (See Appendix B -Flathead County Subdivision Regulations).
- 4. One reduced copy of the preliminary plat not to exceed 11" x 17" in size.
- 5. Application fee.
- 6. A separate fee made out to 'GIS' for the 'Adjoining Property Owners List'. The list will be sent directly to the Planning & Zoning office and is valid for a period of 6 months from date generated. You may also get a certified adjoining landowners list from a title company if you choose.

This application shall be submitted, along with all information required by the applicable Subdivision Regulations and the Montana Subdivision and Platting Act, and the appropriate fee to:

Flathead County Planning & Zoning Office 40 11th Street West, Ste 220

Kalispell, Montana 59901 - Phone: (406) 751-8200 Fax: (406) 751-8210

I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other submitted forms, documents, plans or any other information submitted as a part of this application, to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be untrue, I understand that any approval based thereon may be rescinded and other appropriate action taken. The signing of this application signifies approval for the Flathead County Planning and Zoning staff to be present on the property for routine monitoring and inspection during the approval and development process.

Applicant Signature

Owner(s) Signature (all owners must sign)

Date

Date